

AMENDMENTS TO THE CLAIMS

This listing of claims will replace all prior versions and listings of claims in the application:

LISTING OF CLAIMS:

- 1.-36. (Cancelled).
37. (newly added) A method comprising the steps of:
 - (a) determining the genotype of DNA encoding at least one Fcγ receptor, wherein said DNA is obtained from a test human subject; and
 - (b) making a benign prognosis for multiple sclerosis for said test human subject when the determined genotype for the DNA is FcγRIIA H/H, FcγRIIIB NA1/NA1 or a combination thereof.
38. (newly added) A method comprising the steps of:
 - (a) determining the genotype of DNA encoding at least one Fcγ receptor, wherein said DNA is obtained from a test human subject;
 - (b) making a non-benign prognosis for myasthenia gravis for said test human subject when the determined genotype for the DNA is FcγRIIIB NA1/NA1; and
 - (c) making a benign prognosis for myasthenia gravis for said test human subject when the determined genotype for the DNA is FcγRIIA R/R, FcγRIIIB NA2/NA2 or a combination thereof.

39. (newly added) A method comprising the steps of:

- (a) determining the genotype of DNA encoding at least one Fcγ receptor, wherein said DNA is obtained from a test human subject; and
- (b) making a non-benign prognosis for diabetes mellitus for said test human subject when the determined genotype for the DNA is FcγRIIIB NA1/NA1, FcγRIIA H/H or a combination thereof.

40. (newly added) A method comprising the steps of:

- (a) determining the genotype of DNA encoding at least one Fcγ receptor, wherein said DNA is obtained from a test human subject; and
- (b) making a non-benign prognosis for cardiovascular disease, atherosclerosis or non-immune related cerebrovascular disease, for said test human subject when the determined genotype for the DNA is FcγRIIIB NA2/NA2.

41. (newly added) A method comprising the steps of:

- (a) determining the genotype of DNA encoding at least one Fcγ receptor, wherein said DNA is obtained from a test human subject; and
- (b) making a non-benign prognosis for Addison's disease for said test human subject when the determined genotype for the DNA is FcγRIIA H/H.

42. The method of claim 37, wherein said genotype is determined using an Fcγ receptor allele-specific binder.

43. The method of claim 38, wherein when a non-benign prognosis is made, said method further comprises the step of determining the presence or absence of a genetic marker for susceptibility to myasthenia gravis in the test human subject.

44. The method of claim 38, wherein when a non-benign prognosis is made, said method further comprises the step of subjecting the test human subject to diagnostic imaging.

45. The method of claim 38, wherein when a non-benign prognosis is made, said method further comprises the step of subjecting the test human subject to surgical intervention against myasthenia gravis.

46. The method of claim 38, wherein when a non-benign prognosis is made, said method further comprises the step of administering, to the test human subject, a prophylactically or therapeutically effective amount of a prophylactic or therapeutic material against myasthenia gravis.

47. The method of claim 43, wherein when a non-benign prognosis is made and the presence of said genetic marker for susceptibility to myasthenia gravis is found in the test human subject, said method further comprises the step of administering, to the test human subject, a prophylactically or therapeutically effective amount of a prophylactic or therapeutic material against myasthenia gravis.

48. The method of claim 43, wherein said method further comprises the step of subjecting the test human subject to diagnostic imaging.

49. The method of claim 43, wherein said method further comprises the step of subjecting the test human subject to surgical intervention against myasthenia gravis.

50. The method of claim 38, wherein said genotype is determined using an Fcγ receptor allele-specific binder.

51. The method of claim 39, wherein when a non-benign prognosis is made, said method further comprises the step of determining the presence or absence of a genetic marker for susceptibility to diabetes mellitus in the test human subject.

52. The method of claim 39, wherein when a non-benign prognosis is made, said method further comprises the step of subjecting the test human subject to diagnostic imaging.

53. The method of claim 39, wherein when a non-benign prognosis is made, said method further comprises the step of subjecting the test human subject to surgical intervention against diabetes mellitus.

54. The method of claim 39, wherein when a non-benign prognosis is made, said method further comprises the step of administering, to the test human subject, a prophylactically or therapeutically effective amount of a prophylactic or therapeutic material against diabetes mellitus.

55. The method of claim 51, wherein when a non-benign prognosis is made and the presence of said genetic marker for susceptibility to myasthenia gravis is found in the test human subject, said method further comprises the step of administering, to the test human subject, a prophylactically or therapeutically effective amount of a prophylactic or therapeutic material against diabetes mellitus.

56. The method of claim 51, wherein said method further comprises the step of subjecting the test human subject to diagnostic imaging.

57. The method of claim 51, wherein said method further comprises the step of subjecting the test human subject to surgical intervention against diabetes mellitus.

58. The method of claim 39, wherein said genotype is determined using an Fcγ receptor allele-specific binder.

59. The method of claim 40, wherein when a non-benign prognosis is made, said method further comprises the step of determining the presence or absence of a genetic marker for susceptibility to cardiovascular disease, atherosclerosis or non-immune related cerebrovascular disease in the test human subject.

60. The method of claim 40, wherein when a non-benign prognosis is made, said method further comprises the step of subjecting the test human subject to diagnostic imaging.

61. The method of claim 40, wherein when a non-benign prognosis is made, said method further comprises the step of subjecting the test human subject to surgical intervention against cardiovascular disease, atherosclerosis or non-immune related cerebrovascular disease.

62. The method of claim 40, wherein when a non-benign prognosis is made, said method further comprises the step of administering, to the test human subject, a prophylactically or therapeutically effective amount of a prophylactic or therapeutic material against cardiovascular disease, atherosclerosis or non-immune related cerebrovascular disease.

63. The method of claim 59, wherein when a non-benign prognosis is made and the presence of said genetic marker for susceptibility to myasthenia gravis is found in the test human subject, said method further comprises the step of administering, to the test human subject, a prophylactically or therapeutically effective amount of a prophylactic or therapeutic material against cardiovascular disease, atherosclerosis or non-immune related cerebrovascular disease.

64. The method of claim 59, wherein said method further comprises the step of subjecting the test human subject to diagnostic imaging.

65. The method of claim 59, wherein said method further comprises the step of subjecting the test human subject to surgical intervention against cardiovascular disease, atherosclerosis or non-immune related cerebrovascular disease.

66. The method of claim 40, wherein said genotype is determined using an Fcγ receptor allele-specific binder.

67. The method of claim 41, wherein when a non-benign prognosis is made, said method further comprises the step of determining the presence or absence of a genetic marker for susceptibility to Addison's disease in the test human subject.

68. The method of claim 41, wherein when a non-benign prognosis is made, said method further comprises the step of subjecting the test human subject to diagnostic imaging.

69. The method of claim 41, wherein when a non-benign prognosis is made, said method further comprises the step of subjecting the test human subject to surgical intervention against Addison's disease.

70. The method of claim 41, wherein when a non-benign prognosis is made, said method further comprises the step of administering, to the test human subject, a prophylactically or therapeutically effective amount of a prophylactic or therapeutic material against Addison's disease.

71. The method of claim 67, wherein when a non-benign prognosis is made and the presence of said genetic marker for susceptibility to myasthenia gravis is found in the test human subject, said method further comprises the step of administering, to the test human subject, a prophylactically or therapeutically effective amount of a prophylactic or therapeutic material against Addison's disease.

72. The method of claim 67, wherein said method further comprises the step of subjecting the test human subject to diagnostic imaging.

73. The method of claim 67, wherein said method further comprises the step of subjecting the test human subject to surgical intervention against Addison's disease.

74. The method of claim 41, wherein said genotype is determined using an Fcγ receptor allele-specific binder.